

Fill in this information to identify the case:

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): Chapter 11

☐ Check if this is an amended filing

Official Form 201

Voluntary Petition for Non-Individuals Filing for Bankruptcy

06/22

If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write the debtor's name and the case number (if known). For more information, a separate document, *Instructions for Bankruptcy Forms for Non-Individuals*, is available.

1. Debtor's name FORSYTHE COSMETIC GROUP, LTD.

2. All other names debtor used in the last 8 years

Include any assumed names, trade names, and *doing business as names*

3. Debtor's federal Employer Identification Number (EIN) 1 1 - 2 5 1 5 2 5 3

4. Debtor's address

Principal place of business

Mailing address, if different from principal place of business

10 Niagara Avenue

Number Street

Freeport, NY 11520

City State ZIP Code

Nassau

County

Number Street

City State ZIP Code

Location of principal assets, if different from principal place of business

Number Street

City State ZIP Code

5. Debtor's website (URL) WWW.COLORCLUB.COM

6. Type of debtor

☒ Corporation (including Limited Liability Company (LLC) and Limited Liability Partnership (LLP))☐ Partnership (excluding LLP)☐ Other. Specify:

Debtor FORSYTHE COSMETIC GROUP, LTD.

Case number (if known) _____

Name _____

7. Describe debtor's business

A. Check one:

- ☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))
- ☐ Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))
- ☐ Railroad (as defined in 11 U.S.C. § 101(44))
- ☐ Stockbroker (as defined in 11 U.S.C. § 101(53A))
- ☐ Commodity Broker (as defined in 11 U.S.C. § 101(6))
- ☐ Clearing Bank (as defined in 11 U.S.C. § 781(3))
- ☒ None of the above

B. Check all that apply:

- ☐ Tax-exempt entity (as described in 26 U.S.C. § 501)
- ☐ Investment company, including hedge fund or pooled investment vehicle (as defined in 15 U.S.C. § 80a-3)
- ☐ Investment advisor (as defined in 15 U.S.C. § 80b-2(a)(11))

C. NAICS (North American Industry Classification System) 4-digit code that best describes debtor. See <http://www.uscourts.gov/four-digit-national-association-naics-codes>.3 2 5 9**8. Under which chapter of the Bankruptcy Code is the debtor filing?**

A debtor who is a "small business debtor" must check the first subbox. A debtor as defined in § 1182(1) who elects to proceed under subchapter V of chapter 11 (whether or not the debtor is a "small business debtor") must check the second sub-box

Check one:

- ☐ Chapter 7
- ☐ Chapter 9
- ☒ Chapter 11. *Check all that apply:*

- ☐ The debtor is a small business debtor as defined in 11 U.S.C. § 101(51D), and its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$3,024,725. If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☒ The debtor is a debtor as defined in 11 U.S.C. § 1182(1), its aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$7,500,000, **and it chooses to proceed under Subchapter V of Chapter 11.** If this sub-box is selected, attach the most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return, or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).
- ☐ A plan is being filed with this petition.
- ☐ Acceptances of the plan were solicited prepetition from one or more classes of creditors, in accordance with 11 U.S.C. § 1126(b).
- ☐ The debtor is required to file periodic reports (for example, 10K and 10Q) with the Securities and Exchange Commission according to § 13 or 15(d) of the Securities Exchange Act of 1934. File the *Attachment to Voluntary Petition for Non-Individuals Filing for Bankruptcy under Chapter 11* (Official Form 201A) with this form.
- ☐ The debtor is a shell company as defined in the Securities Exchange Act of 1934 Rule 12b-2.

☐ Chapter 12**9. Were prior bankruptcy cases filed by or against the debtor within the last 8 years?**☒ No

☐ Yes. District _____ When _____ Case number _____
MM / DD / YYYY

District _____ When _____ Case number _____
MM / DD / YYYY

If more than 2 cases, attach a separate list.

10. Are any bankruptcy cases pending or being filed by a business partner or an affiliate of the debtor?☒ No

☐ Yes. Debtor _____ Relationship _____
District _____ When _____
Case number, if known _____
MM / DD / YYYY

List all cases. If more than 1, attach a separate list.

Debtor FORSYTHE COSMETIC GROUP, LTD.
Name

Case number (if known) _____

11. Why is the case filed in *this* district?

Check all that apply:

- ☒ Debtor has had its domicile, principal place of business, or principal assets in this district for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other district.
- ☐ A bankruptcy case concerning debtor's affiliate, general partner, or partnership is pending in this district.

12. Does the debtor own or have possession of any real property or personal property that needs immediate attention?

☒ No

☐ Yes. Answer below for each property that needs immediate attention. Attach additional sheets if needed.

Why does the property need immediate attention? (Check all that apply.)

☐ It poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety.
What is the hazard?

☐ It needs to be physically secured or protected from the weather.

☐ It includes perishable goods or assets that could quickly deteriorate or lose value without attention (for example, livestock, seasonal goods, meat, dairy, produce, or securities-related assets or other options).

☐ Other _____

Where is the property? _____

Number Street

City

State

ZIP Code

Is the property insured?

☐ No

☐ Yes. Insurance agency _____
Contact name _____
Phone _____

Statistical and administrative information

13. Debtor's estimation of available funds?

Check one:

- ☐ Funds will be available for distribution to unsecured creditors.
- ☒ After any administrative expenses are paid, no funds will be available for distribution to unsecured creditors.

14. Estimated number of creditors

- ☐ 1-49 ☒ 50-99 ☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 25,001-50,000 ☐ 50,000-100,000
- ☐ 100-199 ☐ 200-999 ☐ 10,001-25,000 ☐ More than 100,000

15. Estimated assets

- ☐ \$0-\$50,000 ☐ \$1,000,001-\$10 million ☐ \$500,000,001-\$1 billion
- ☐ \$50,001-\$100,000 ☐ \$10,000,001-\$50 million ☐ \$1,000,000,001-\$10 billion
- ☒ \$100,001-\$500,000 ☐ \$50,000,001-\$100 million ☐ \$10,000,000,001-\$50 billion
- ☐ \$500,001-\$1 million ☐ \$100,000,001-\$500 million ☐ More than \$50 billion

Debtor FORSYTHE COSMETIC GROUP, LTD.
Name

Case number (if known) _____

16. Estimated liabilities

- | | | |
|--|--|--|
| <input type="checkbox"/> \$0-\$50,000 | <input checked="" type="checkbox"/> \$1,000,001-\$10 million | <input type="checkbox"/> \$500,000,001-\$1 billion |
| <input type="checkbox"/> \$50,001-\$100,000 | <input type="checkbox"/> \$10,000,001-\$50 million | <input type="checkbox"/> \$1,000,000,001-\$10 billion |
| <input type="checkbox"/> \$100,001-\$500,000 | <input type="checkbox"/> \$50,000,001-\$100 million | <input type="checkbox"/> \$10,000,000,001-\$50 billion |
| <input type="checkbox"/> \$500,001-\$1 million | <input type="checkbox"/> \$100,000,001-\$500 million | <input type="checkbox"/> More than \$50 billion |

Request for Relief, Declaration, and Signatures

WARNING -- Bankruptcy fraud is a serious crime. Making a false statement in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

17. Declaration and signature of authorized representative of debtor

- The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.
- I have been authorized to file this petition on behalf of the debtor.
- I have examined the information in this petition and have a reasonable belief that the information is true and correct.

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 3/13/2024
MM/ DD/ YYYY

X Whitney Matza
Signature of authorized representative of debtor

Whitney Matza
Printed name

Title Secretary and Treasurer

18. Signature of attorney

X /s/ Charles A. Higgs
Signature of attorney for debtor

Date 03/13/2024
MM/ DD/ YYYY

Charles Higgs
Printed name

The Law Office of Charles A. Higgs
Firm name

2 Depot Plaza First Floor, Office 4
Number Street

Bedford Hills
City

NY 10507
State ZIP Code

(917) 673-3768
Contact phone

charles@freshstartesq.com
Email address

Bar number

State

Fill in this information to identify the case:Debtor name FORSYTHE COSMETIC GROUP, LTD.

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 202****Declaration Under Penalty of Perjury for Non-Individual Debtors**

12/15

An individual who is authorized to act on behalf of a non-individual debtor, such as a corporation or partnership, must sign and submit this form for the schedules of assets and liabilities, any other document that requires a declaration that is not included in the document, and any amendments of those documents. This form must state the individual's position or relationship to the debtor, the identity of the document, and the date. Bankruptcy Rules 1008 and 9011.

WARNING – Bankruptcy fraud is a serious crime. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$500,000 or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

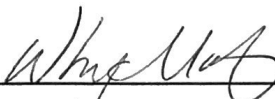
Declaration and signature

I am the president, another officer, or an authorized agent of the corporation; a member or an authorized agent of the partnership; or another individual serving as a representative of the debtor in this case.

I have examined the information in the documents checked below and I have a reasonable belief that the information is true and correct:

- ☒ *Schedule A/B: Assets—Real and Personal Property* (Official Form 206A/B)
- ☒ *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 206D)
- ☒ *Schedule E/F: Creditors Who Have Unsecured Claims* (Official Form 206E/F)
- ☒ *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G)
- ☒ *Schedule H: Codebtors* (Official Form 206H)
- ☒ *A Summary of Assets and Liabilities for Non-Individuals* (Official Form 206A-Summary)
- ☐ Amended Schedule _____
- ☒ *Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders* (Official Form 204)
- ☐ Other document that requires a declaration _____

I declare under penalty of perjury that the foregoing is true and correct.

Executed on 03/13/2024MM/ DD/ YYYYX 

Signature of individual signing on behalf of debtor

Whitney Matza

Printed name

Secretary and Treasurer

Position or relationship to debtor

Fill in this information to identify the case:

Debtor name FORSYTHE COSMETIC GROUP, LTD.

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 204****Chapter 11 or Chapter 9 Cases: List of Creditors Who Have the 20 Largest Unsecured Claims and Are Not Insiders****12/15**

A list of creditors holding the 20 largest unsecured claims must be filed in a Chapter 11 or Chapter 9 case. Include claims which the debtor disputes. Do not include claims by any person or entity who is an *insider*, as defined in 11 U.S.C. § 101(31). Also, do not include claims by secured creditors, unless the unsecured claim resulting from inadequate collateral value places the creditor among the holders of the 20 largest unsecured claims.

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
1	Advantage Paper & Packaging P.O. Box 787 Deer Park, NY 11729-0787						\$32,302.85
2	American Express PO Box 297871 Fort Lauderdale, FL 33329		Credit Card				\$60,239.56
3	Capital One Spark Business PO Box 71083 Edneyville, NC 28272		credit card				\$43,312.80
4	Edison Litho 3725 Tonelle Ave North Bergen, NJ 07047		Trade Debt				\$35,000.00
5	Freeport Screen & Stamping, Inc. 31 Hanse Ave Freeport, NY 11520		trade debt				\$99,327.45
6	Jay Stone Sales 24600 Southwell Rd Dallas, TX 75229		Sales				\$47,884.72
7	Kascap 208, Pujit Plaza, Plot 67 Sector 11, CBD Belapur, Navi Mumbai 400614 Maharashtra, India ,		Trade Debt				\$42,996.23
8	Kirker Enterprises, Inc. 2220 US Highway 70 SE Suite 100 Hickory, NC 28602		Trade Debt				\$49,093.48

Debtor FORSYTHE COSMETIC GROUP, LTD.

Case number (if known) _____

Name

	Name of creditor and complete mailing address, including zip code	Name, telephone number, and email address of creditor contact	Nature of the claim (for example, trade debts, bank loans, professional services, and government contracts)	Indicate if claim is contingent, unliquidated, or disputed	Amount of unsecured claim If the claim is fully unsecured, fill in only unsecured claim amount. If claim is partially secured, fill in total claim amount and deduction for value of collateral or setoff to calculate unsecured claim.		
					Total claim, if partially secured	Deduction for value of collateral or setoff	Unsecured claim
9	MeadowBrook Inventions PO Box 960 260 Mine Brook Rd Bernardsville, NJ 07924		Trade Debt				\$43,353.75
10	MP Holdings, Co. 1881 Stanley Drive Merrick, NY 11566		Trade Debt				\$296,436.97
11	Osborn Law, PC 43 West 43rd Street 131 New York, NY 10036		Legal Services				\$67,824.75
12	PACER Technology 3281 E. Guasti Rd 260 Ontario, CA 91761		Trade Debt				\$65,474.20
13	PayPal PO Box 5138 Lutherville Timonium, MD 21094		loan				\$29,000.00
14	PM Plastics 627 Capital Drive Pewaukee, WI 53072		Trade Debt				\$87,216.86
15	Rad-Solutions, LLC 2201 Justin Rd 119-142 Flower Mound, TX 75028		Trade Debt	Disputed			\$135,065.70
16	Sandream Impact, LLC 373 Route 46 West Bldg E Fairfield, NJ 07004		Trade Debt				\$37,960.00
17	Stephen Gould 35 South Jefferson Road Whippany, NJ 07981		Trade Debt				\$872,430.00
18	Team Technologies 5949 Commerce Blvd Morristown, TN 37814		Trade Debt				\$41,684.80
19	Vedder Price, PC 222 N. LaSalle Street 2400 Chicago, IL 60601		Legal Services				\$60,345.10
20	Viavi Solutions 3047 Orchard Parkway 10 San Jose, CA 95134		Trade Debt				\$30,000.00

Fill in this information to identify the case:

Debtor Name FORSYTHE COSMETIC GROUP, LTD.United States Bankruptcy Court for the: Eastern District of New York
(State)

Case number (if known): _____

☐ Check if this is an amended filing

Official Form 206A/B

Schedule A/B: Assets — Real and Personal Property

12/15

Disclose all property, real and personal, which the debtor owns or in which the debtor has any other legal, equitable, or future interest. Include all property in which the debtor holds rights and powers exercisable for the debtor's own benefit. Also include assets and properties which have no book value, such as fully depreciated assets or assets that were not capitalized. In Schedule A/B, list any executory contracts or unexpired leases. Also list them on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G).

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. At the top of any pages added, write the debtor's name and case number (if known). Also identify the form and line number to which the additional information applies. If an additional sheet is attached, include the amounts from the attachment in the total for the pertinent part.

For Part 1 through Part 11, list each asset under the appropriate category or attach separate supporting schedules, such as a fixed asset schedule or depreciation schedule, that gives the details for each asset in a particular category. List each asset only once. In valuing the debtor's interest, do not deduct the value of secured claims. See the instructions to understand the terms used in this form.

Part 1: Cash and cash equivalents

1. Does the debtor have any cash or cash equivalents?

- ☐ No. Go to Part 2.
☒ Yes. Fill in the information below.

All cash or cash equivalents owned or controlled by the debtor

Current value of debtor's interest

2. Cash on hand \$1,278.00

3. Checking, savings, money market, or financial brokerage accounts (Identify all)

Name of institution (bank or brokerage firm) Type of account Last 4 digits of account number

3.1. Chase Checking account 4 9 9 0 \$0.00

4. Other cash equivalents (Identify all)

4.1 _____

4.2 _____

5. Total of Part 1

Add lines 2 through 4 (including amounts on any additional sheets). Copy the total to line 80.

\$1,278.00

Part 2: Deposits and prepayments

6. Does the debtor have any deposits or prepayments?

- ☐ No. Go to Part 3.
☒ Yes. Fill in the information below.

Current value of debtor's interest

7. Deposits, including security deposits and utility deposits

Description, including name of holder of deposit

7.1 _____

7.2 _____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

8. Prepayments, including prepayments on executory contracts, leases, insurance, taxes, and rent

Description, including name of holder of prepayment

8.1 **10 Niagra Ave, LLC** **\$173,000.00**

9. Total of Part 2

Add lines 7 through 8. Copy the total to line 81.

\$173,000.00

Part 3: Accounts receivable

10. Does the debtor have any accounts receivable?

- ☐ No. Go to Part 4.
☒ Yes. Fill in the information below.

**Current value of
debtor's interest**

11. Accounts receivable

11a. 90 days old or less:	<u>\$32,781.00</u>	-	<u>unknown</u>	=..... →	<u>\$32,781.00</u>
	face amount		doubtful or uncollectible accounts		
11b. Over 90 days old:	<u>\$419,472.00</u>	-	<u>\$419,472.00</u>	=..... →	<u>unknown</u>
	face amount		doubtful or uncollectible accounts		

12. Total of Part 3

Current value on lines 11a + 11b = line 12. Copy the total to line 82.

\$32,781.00

Part 4: Investments

13. Does the debtor own any investments?

- ☒ No. Go to Part 5.
☐ Yes. Fill in the information below.

**Valuation method used
for current value**

**Current value of
debtor's interest**

14. Mutual funds or publicly traded stocks not included in Part 1

Name of fund or stock:

14.1 _____

14.2 _____

15. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including any interest in an LLC, partnership, or joint venture

Name of entity:

% of
ownership:

15.1. _____

15.2. _____

16. Government bonds, corporate bonds, and other negotiable and non-negotiable instruments not included in Part 1

Describe:

16.1 _____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

16.2 _____

17. Total of Part 4

Add lines 14 through 16. Copy the total to line 83.

Part 5: Inventory, excluding agriculture assets

18. Does the debtor own any inventory (excluding agriculture assets)?

☐ No. Go to Part 6.

☒ Yes. Fill in the information below.

General description	Date of the last physical inventory	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
19. Raw materials				
<u>[See Attached List]</u>	_____	<u>unknown</u>	_____	<u>unknown</u>
	MM / DD / YYYY			
20. Work in progress				
_____	_____	_____	_____	_____
	MM / DD / YYYY			
21. Finished goods, including goods held for resale				
<u>[See Attached List]</u>	_____	<u>unknown</u>	_____	<u>unknown</u>
	MM / DD / YYYY			
22. Other inventory or supplies				
_____	_____	_____	_____	_____
	MM / DD / YYYY			

23. Total of Part 5

Add lines 19 through 22. Copy the total to line 84.

24. Is any of the property listed in Part 5 perishable?

☒ No

☐ Yes

25. Has any of the property listed in Part 5 been purchased within 20 days before the bankruptcy was filed?

☒ No

☐ Yes. Book value _____ Valuation method _____ Current value _____

26. Has any of the property listed in Part 5 been appraised by a professional within the last year?

☒ No

☐ Yes

Part 6: Farming and fishing-related assets (other than titled motor vehicles and land)

27. Does the debtor own or lease any farming and fishing-related assets (other than titled motor vehicles and land)?

☒ No. Go to Part 7.

☐ Yes. Fill in the information below.

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
28. Crops—either planted or harvested			
29. Farm animals <i>Examples:</i> Livestock, poultry, farm-raised fish			
30. Farm machinery and equipment (Other than titled motor vehicles)			
31. Farm and fishing supplies, chemicals, and feed			
32. Other farming and fishing-related property not already listed in Part 6			
33. Total of Part 6 Add lines 28 through 32. Copy the total to line 85.			_____
34. Is the debtor a member of an agricultural cooperative?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Is any of the debtor's property stored at the cooperative? <input type="checkbox"/> No <input type="checkbox"/> Yes			
35. Has any of the property listed in Part 6 been purchased within 20 days before the bankruptcy was filed?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes. Book value _____ Valuation method _____ Current value _____			
36. Is a depreciation schedule available for any of the property listed in Part 6?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
37. Has any of the property listed in Part 6 been appraised by a professional within the last year?			
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
Part 7: Office furniture, fixtures, and equipment; and collectibles			
38. Does the debtor own or lease any office furniture, fixtures, equipment, or collectibles?			
<input type="checkbox"/> No. Go to Part 8. <input checked="" type="checkbox"/> Yes. Fill in the information below.			
General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
39. Office furniture			

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
 Name

Case number (if known) _____

	<u>14 Chairs</u>	<u>unknown</u>	<u>unknown</u>
	<u>6 File Cabinets</u>	<u>unknown</u>	<u>unknown</u>
	<u>8 Office Cubicles</u>	<u>unknown</u>	<u>unknown</u>
	<u>4 Office Desks</u>	<u>unknown</u>	<u>unknown</u>
	<u>1 Conference Room Table</u>	<u>unknown</u>	<u>unknown</u>
40.	<u>Office fixtures</u>		
41.	<u>Office equipment, including all computer equipment and communication systems equipment and software</u>		
	<u>10 Phones</u>	<u>unknown</u>	<u>unknown</u>
	<u>8 Computers</u>	<u>unknown</u>	<u>unknown</u>
	<u>(4) 2HP Hockmeyer Bench Top Mixers</u>	<u>unknown</u>	<u>unknown</u>
	<u>[2] Shold Floor Mixers 10HP</u>	<u>unknown</u>	<u>unknown</u>
	<u>Tara Systems Floor Scale 600lbs</u>	<u>unknown</u>	<u>unknown</u>
	<u>[2] Sartorius Scale 5000g</u>	<u>unknown</u>	<u>unknown</u>
	<u>Brookfield Viscometer</u>	<u>unknown</u>	<u>unknown</u>
	<u>pneumatic ball dropper</u>	<u>unknown</u>	<u>unknown</u>
	<u>24 station indexing table</u>	<u>unknown</u>	<u>unknown</u>
	<u>pneumatic cap turner</u>	<u>unknown</u>	<u>unknown</u>
	<u>mounted on stainless steel table</u>	<u>unknown</u>	<u>unknown</u>
	<u>LSI bottom labeling system with belt conveyor and PDC heat tunnel</u>	<u>unknown</u>	<u>unknown</u>
	<u>LSI bottom labeling system with belt conveyor and PDC heat tunnel</u>	<u>unknown</u>	<u>unknown</u>
	<u>3' infeed table</u>	<u>unknown</u>	<u>unknown</u>
	<u>two vacuum fillers (2 heads each)</u>	<u>unknown</u>	<u>unknown</u>
	<u>pneumatic ball dropper</u>	<u>unknown</u>	<u>unknown</u>
	<u>15' x 3 1/4" table top chain conveyor</u>	<u>unknown</u>	<u>unknown</u>
	<u>pneumatic capper</u>	<u>unknown</u>	<u>unknown</u>
	<u>48" accumulating table</u>	<u>unknown</u>	<u>unknown</u>
	<u>image 9020 inkjet coder</u>	<u>unknown</u>	<u>unknown</u>
	<u>22' x 3 1/4" tabletop chain conveyor</u>	<u>unknown</u>	<u>unknown</u>
	<u>1/3 HP ball dropper</u>	<u>unknown</u>	<u>unknown</u>
	<u>image 9020 inkjet coder</u>	<u>unknown</u>	<u>unknown</u>
	<u>Four vacuum fillers (2 heads each)</u>	<u>unknown</u>	<u>unknown</u>
	<u>Two pneumatic cappers</u>	<u>unknown</u>	<u>unknown</u>

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name _____

Case number (if known) _____

<u>36"accumulating table</u>	<u>unknown</u>	<u>unknown</u>
<u>36" unscrambling table</u>	<u>unknown</u>	<u>unknown</u>
<u>18' x 3 1/4" tabletop chain conveyor</u>	<u>unknown</u>	<u>unknown</u>
<u>1/3 HP ball dropper</u>	<u>unknown</u>	<u>unknown</u>
<u>image 9020 inkjet coder</u>	<u>unknown</u>	<u>unknown</u>
<u>Three vacuum fillers (2 heads each)</u>	<u>unknown</u>	<u>unknown</u>
<u>Pneumatic capper</u>	<u>unknown</u>	<u>unknown</u>
<u>36" accumulating table</u>	<u>unknown</u>	<u>unknown</u>
<u>14' x 3 1/4" tabletop chain conveyor</u>	<u>unknown</u>	<u>unknown</u>
<u>1/3 HP ball dropper</u>	<u>unknown</u>	<u>unknown</u>
<u>image 9020 inkjet coder</u>	<u>unknown</u>	<u>unknown</u>
<u>Two vacuum fillers (2 heads each)</u>	<u>unknown</u>	<u>unknown</u>
<u>Pneumatic capper</u>	<u>unknown</u>	<u>unknown</u>
<u>36" accumulating table</u>	<u>unknown</u>	<u>unknown</u>
<u>40 HP Ingersol Rand air compressor</u>	<u>unknown</u>	<u>unknown</u>
<u>10 HP Joy air compressor</u>	<u>unknown</u>	<u>unknown</u>
<u>Ingersol Filter Dryer</u>	<u>unknown</u>	<u>unknown</u>
<u>300 gal storage tank</u>	<u>unknown</u>	<u>unknown</u>
<u>10 1/3-1 HP vacuum pumps</u>	<u>unknown</u>	<u>unknown</u>
<u>Avery bottom labeling system (not working)</u>	<u>unknown</u>	<u>unknown</u>
<u>Hyster 3000lb Hi LO</u>	<u>unknown</u>	<u>unknown</u>

42. **Collectibles** *Examples:* Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; china and crystal; stamp, coin, or baseball card collections; other collections, memorabilia, or collectibles

42.1	_____	_____	_____
42.2	_____	_____	_____
42.3	_____	_____	_____

43. **Total of Part 7**

Add lines 39 through 42. Copy the total to line 86.

44. **Is a depreciation schedule available for any of the property listed in Part 7?**

☒ No
☐ Yes

45. **Has any of the property listed in Part 7 been appraised by a professional within the last year?**

☒ No
☐ Yes

Part 8: Machinery, equipment, and vehicles

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

46. Does the debtor own or lease any machinery, equipment, or vehicles?

- ☐ No. Go to Part 9.
☒ Yes. Fill in the information below.

General description Include year, make, model, and identification numbers (i.e., VIN, HIN, or N-number)	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
47. Automobiles, vans, trucks, motorcycles, trailers, and titled farm vehicles			
47.1 <u>2008 Ford Pickup</u>	<u>unknown</u>		<u>unknown</u>
48. Watercraft, trailers, motors, and related accessories Examples: Boats, trailers, motors, floating homes, personal watercraft, and fishing vessels			
48.1 _____	_____	_____	_____
48.2 _____	_____	_____	_____
49. Aircraft and accessories			
49.1 _____	_____	_____	_____
49.2 _____	_____	_____	_____
50. Other machinery, fixtures, and equipment (excluding farm machinery and equipment)			
<u>2013 Hyster / Forklift</u>	<u>unknown</u>		<u>unknown</u>
51. Total of Part 8 Add lines 47 through 50. Copy the total to line 87.			<div style="border: 1px solid black; width: 100px; height: 20px;"></div>

52. Is a depreciation schedule available for any of the property listed in Part 8?

- ☒ No
☐ Yes

53. Has any of the property listed in Part 8 been appraised by a professional within the last year?

- ☒ No
☐ Yes

Part 9: Real property

54. Does the debtor own or lease any real property?

- ☒ No. Go to Part 10.
☐ Yes. Fill in the information below.

55. Any building, other improved real estate, or land which the debtor owns or in which the debtor has an interest

Description and location of property Include street address or other description such as Assessor Parcel Number (APN), and type of property (for example, acreage, factory, warehouse, apartment or office building), if available.	Nature and extent of debtor's interest in property	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
55.1 _____	_____	_____	_____	_____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

55.2 _____
55.3 _____
55.4 _____
55.5 _____
55.6 _____

56. **Total of Part 9**

Add the current value on lines 55.1 through 55.6 and entries from any additional sheets. Copy the total to line 88.

57. **Is a depreciation schedule available for any of the property listed in Part 9?**

- ☒ No
☐ Yes

58. **Has any of the property listed in Part 9 been appraised by a professional within the last year?**

- ☒ No
☐ Yes

Part 10: Intangibles and intellectual property

59. **Does the debtor have any interests in intangibles or intellectual property?**

- ☐ No. Go to Part 11.
☒ Yes. Fill in the information below.

General description	Net book value of debtor's interest (Where available)	Valuation method used for current value	Current value of debtor's interest
60. Patents, copyrights, trademarks, and trade secrets			
Trademark: Cosmetic Arts: Registration # 3936663	unknown		unknown
Trademark: Vitabase: 3543333	unknown		unknown
Trademark: NailMojj: Registration # 3543333	unknown		unknown
Trademark: One & Done: Registration #3618685	unknown		unknown
Trademark: Funky Fingers: Registration # 3618685	unknown		unknown
Trademark: The Future of Care: Registration # 4937844	unknown		unknown
Trademark: Cosmetic Arts: Registration # 4937844	unknown		unknown
Trademark: 3 Ways to Wear: Registration # 5629694	unknown		unknown
Trademark: Chip Free: Registration # 5629694	unknown		unknown
Trademark: Loosen Up: Registration # 3543381	unknown		unknown
Trademark: ColorClub: Registration # 4604435	unknown		unknown
Trademark: 0-60: Registration #: 4604435	unknown		unknown
Trademark: The Future of Color: Registration #: 4757234	unknown		unknown
Trademark: Artclub: Registration #: 4757234	unknown		unknown
Trademark: Seren-Dip-ity: Registration #: 5704051	unknown		unknown
Trademark: Color Club: Registration #: 5704051	unknown		unknown

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

	Trademark: Dry Ice: Registration #:3634001	unknown	unknown
	Trademark: Stuck on You: Registration #: 3625753	unknown	unknown
61.	Internet domain names and websites		
	<u>WWW.COLORCLUB.COM</u>	unknown	unknown
	<u>shopcolorclub.com, cosmeticgroup.com, forsythecosmeticgroup.com</u>	unknown	unknown
62.	Licenses, franchises, and royalties		

63.	Customer lists, mailing lists, or other compilations		

64.	Other intangibles, or intellectual property		

65.	Goodwill		

66.	Total of Part 10		_____
	Add lines 60 through 65. Copy the total to line 89.		
67.	Do your lists or records include personally identifiable information of customers (as defined in 11 U.S.C. §§ 101(41A) and 107)?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
68.	Is there an amortization or other similar schedule available for any of the property listed in Part 10?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
69.	Has any of the property listed in Part 10 been appraised by a professional within the last year?		
	<input checked="" type="checkbox"/> No		
	<input type="checkbox"/> Yes		
Part 11: All other assets			
70.	Does the debtor own any other assets that have not yet been reported on this form?		
	Include all interests in executory contracts and unexpired leases not previously reported on this form.		
	<input checked="" type="checkbox"/> No. Go to Part 12.		
	<input type="checkbox"/> Yes. Fill in the information below.		
71.	Notes receivable		
	Description (include name of obligor)		
		-	
	Total face amount		doubtful or uncollectible amount
			= →

Current value of
debtor's interest

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

72. Tax refunds and unused net operating losses (NOLs)

Description (for example, federal, state, local)

_____	Tax year _____	_____
_____	Tax year _____	_____
_____	Tax year _____	_____

73. Interests in insurance policies or annuities

74. Causes of action against third parties (whether or not a lawsuit has been filed)

Nature of claim

Amount requested

75. Other contingent and unliquidated claims or causes of action of every nature, including counterclaims of the debtor and rights to set off claims

Nature of claim

Amount requested

76. Trusts, equitable or future interests in property

77. Other property of any kind not already listed *Examples: Season tickets, country club membership*

78. Total of Part 11

Add lines 71 through 77. Copy the total to line 90.

79. Has any of the property listed in Part 11 been appraised by a professional within the last year?

☒ No

☐ Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name

Case number (if known) _____

Part 12: Summary

In Part 12 copy all of the totals from the earlier parts of the form.

Type of property	Current value of personal property	Current value of real property
80. Cash, cash equivalents, and financial assets. <i>Copy line 5, Part 1.</i>	<u>\$1,278.00</u>	
81. Deposits and prepayments. <i>Copy line 9, Part 2.</i>	<u>\$173,000.00</u>	
82. Accounts receivable. <i>Copy line 12, Part 3.</i>	<u>\$32,781.00</u>	
83. Investments. <i>Copy line 17, Part 4.</i>	<u> </u>	
84. Inventory. <i>Copy line 23, Part 5.</i>	<u>unknown</u>	
85. Farming and fishing-related assets. <i>Copy line 33, Part 6.</i>	<u> </u>	
86. Office furniture, fixtures, and equipment; and collectibles. <i>Copy line 43, Part 7.</i>	<u>unknown</u>	
87. Machinery, equipment, and vehicles. <i>Copy line 51, Part 8.</i>	<u>unknown</u>	
88. Real property. <i>Copy line 56, Part 9.....</i> →		<div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>
89. Intangibles and intellectual property. <i>Copy line 66, Part 10.</i>	<u>unknown</u>	
90. All other assets. <i>Copy line 78, Part 11.</i>	+ <u> </u>	
91. Total. <i>Add lines 80 through 90 for each column.....91a.</i>	<div style="border: 1px solid black; padding: 2px;"><u>\$207,059.00</u></div>	+ 91b. <div style="border: 1px solid black; width: 100px; height: 20px; margin-top: 5px;"></div>
92. Total of all property on Schedule A/B. <i>Lines 91a + 91b = 92.</i>		<div style="border: 1px solid black; padding: 2px;"><u>\$207,059.00</u></div>

Fill in this information to identify the case:

Debtor name FORSYTHE COSMETIC GROUP, LTD.United States Bankruptcy Court for the: Eastern District of New York
(State)

Case number (if known): _____

☐ Check if this is an amended filingOfficial Form 206D**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible.**1. Do any creditors have claims secured by debtor's property?**

- ☐ No. Check this box and submit page 1 of this form to the court with debtor's other schedules. Debtor has nothing else to report on this form.
- ☒ Yes. Fill in all of the information below.

Part 1: List Creditors Who Have Secured Claims**2. List in alphabetical order all creditors who have secured claims.** If a creditor has more than one secured claim, list the creditor separately for each claim.**Column A**
Amount of claim

Do not deduct the value of collateral.

Column B
Value of collateral that supports this claim**2.1 Creditor's name**Small Business Administration**Describe debtor's property that is subject to a lien**Debtor's receivables, accounts, and assets\$512,664.78\$32,781.00**Creditor's mailing address**26 Federal PI 3100**Describe the lien**UCCNew York, NY 10278**Creditor's email address, if known****Is the creditor an insider or related party?**

- ☒ No
- ☐ Yes

Date debt was incurred _____**Is anyone else liable on this claim?**

- ☒ No
- ☐ Yes. Fill out Schedule H: Codebtors (Official Form 206H).

Last 4 digits of account number 9 1 0 5**Do multiple creditors have an interest in the same property?**

- ☒ No
- ☐ Yes. Specify each creditor, including this creditor, and its relative priority.
- _____
- _____

As of the petition filing date, the claim is:

Check all that apply.

- ☐ Contingent
- ☐ Unliquidated
- ☐ Disputed

3. Total of the dollar amounts from Part 1, Column A, including the amounts from the Additional Page, if any.\$512,664.78

Fill in this information to identify the case:

Debtor name FORSYTHE COSMETIC GROUP, LTD.

United States Bankruptcy Court for the:

Eastern District of New York

Case number (if known): _____

☐ Check if this is an amended filing**Official Form 206E/F****Schedule E/F: Creditors Who Have Unsecured Claims****12/15**

Be as complete and accurate as possible. Use Part 1 for creditors with **PRIORITY** unsecured claims and Part 2 for creditors with **NONPRIORITY** unsecured claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 206G). Number the entries in Parts 1 and 2 in the boxes on the left. If more space is needed for Part 1 or Part 2, fill out and attach the Additional Page of that Part included in this form.

Part 1: List All Creditors with **PRIORITY** Unsecured Claims**1. Do any creditors have priority unsecured claims?** (See 11 U.S.C. § 507)☒ No. Go to Part 2.☐ Yes. Go to line 2.**2. List in alphabetical order all creditors who have unsecured claims that are entitled to priority in whole or in part.** If the debtor has more than 3 creditors with priority unsecured claims, fill out and attach the Additional Page of Part 1.**2.1** Priority creditor's name and mailing address**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed**Total claim****Priority amount**

Date or dates debt was incurred

Basis for the claim:Last 4 digits of account
number _____**Is the claim subject to offset?**☐ No☐ YesSpecify Code subsection of **PRIORITY** unsecured
claim: 11 U.S.C. § 507(a) _____**2.2** Priority creditor's name and mailing address**As of the petition filing date, the claim is:**

Check all that apply.

☐ Contingent☐ Unliquidated☐ Disputed

Date or dates debt was incurred

Basis for the claim:Last 4 digits of account
number _____**Is the claim subject to offset?**☐ No☐ YesSpecify Code subsection of **PRIORITY** unsecured
claim: 11 U.S.C. § 507(a) _____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Case number (if known) _____

Name

Part 2: List All Creditors with NONPRIORITY Unsecured Claims

3. List in alphabetical order all of the creditors with nonpriority unsecured claims. If the debtor has more than 6 creditors with nonpriority unsecured claims, fill out and attach the Additional Page of Part 2.

Amount of claim**3.1** Nonpriority creditor's name and mailing addressA & F FIRE PROTECTION CO., INC90 Otis StreetWest Babylon, NY 11704

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Service of Building****Basis for the claim:** Sprinklers**Is the claim subject to offset?**☒ No☐ Yes\$1,080.82**3.2** Nonpriority creditor's name and mailing addressABBOTT BALL COMPANYP.O. BOX 330100West Hartford, CT 06133

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:** _____**Is the claim subject to offset?**☒ No☐ Yes\$1,298.32**3.3** Nonpriority creditor's name and mailing addressACTION HAZMAT TRUCKING3010 Burns AvenueWantagh, NY 11793

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:** Hazardous Waste Pickup**Is the claim subject to offset?**☒ No☐ Yes\$1,597.70**3.4** Nonpriority creditor's name and mailing addressAdvantage Paper & PackagingP.O. Box 787Deer Park, NY 11729-0787

Date or dates debt was incurred _____

Last 4 digits of account number _____

As of the petition filing date, the claim is:*Check all that apply.*☐ Contingent☐ Unliquidated☐ Disputed**Basis for the claim:** _____**Is the claim subject to offset?**☒ No☐ Yes\$32,302.85

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 2: Additional Page

3.5	Nonpriority creditor's name and mailing address <u>AMANDA BENZAQUIN MATSIL</u> <u>960 Saint Johnland Road</u> <u>Kings Park, NY 11754</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$8,714.44</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Commission</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.6	Nonpriority creditor's name and mailing address <u>American Express</u> <u>PO Box 297871</u> <u>Fort Lauderdale, FL 33329</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>5</u> <u>0</u> <u>4</u> <u>4</u>	As of the petition filing date, the claim is: <u>\$15,745.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.7	Nonpriority creditor's name and mailing address <u>American Express</u> <u>PO Box 297871</u> <u>Fort Lauderdale, FL 33329</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>7</u> <u>9</u> <u>6</u> <u>6</u>	As of the petition filing date, the claim is: <u>\$60,239.56</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Credit Card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.8	Nonpriority creditor's name and mailing address <u>American Glitters, Inc.</u> <u>68 Linden Street</u> <u>Massapequa Park, NY 11762</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,862.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 2: Additional Page

3.9	Nonpriority creditor's name and mailing address <u>Arcbest</u> <u>3801 Old Greenwood Road</u> <u>Fort Smith, AR 72903</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,888.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service-Freight</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.10	Nonpriority creditor's name and mailing address <u>Atlantic Scale Company, Inc.</u> <u>136 Washington Ave</u> <u>Adelphia, NJ 07710</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$285.68</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.11	Nonpriority creditor's name and mailing address <u>Avrum Rosen</u> <u>38 New Street</u> <u>Huntington, NY 11743</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$5,608.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Attorneys Fees</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.12	Nonpriority creditor's name and mailing address <u>Baralan USA, Inc.</u> <u>120-19 89TH Ave</u> <u>Richmond Hill, NY 11418</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$12,988.79</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 2: Additional Page

3.13 Nonpriority creditor's name and mailing address <u>Briscoe Protective</u> <u>99 Mark Tree Road 201</u> <u>Centereach, NY 11720</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$8,246.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service-Building Alarm</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.14 Nonpriority creditor's name and mailing address <u>BTB Sales & Marketing, Inc.</u> <u>2970 Merrick Rd</u> <u>Bellmore, NY 11710</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$25,015.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Service-Sales & Marketing</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.15 Nonpriority creditor's name and mailing address <u>Capital One Spark Business</u> <u>PO Box 71083</u> <u>Edneyville, NC 28272</u> Date or dates debt was incurred _____ Last 4 digits of account number <u>7 8 0 3</u>	As of the petition filing date, the claim is: <u>\$43,312.80</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>credit card</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.16 Nonpriority creditor's name and mailing address <u>Cintas Corporation</u> <u>500 South Research PL</u> <u>Central Islip, NY 11722</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$839.22</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Uniforms</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 2: Additional Page

3.17	Nonpriority creditor's name and mailing address <u>Color Carton Corp.</u> <u>341 Canal Place</u> <u>Bronx, NY 10451</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$24,486.10</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.18	Nonpriority creditor's name and mailing address <u>Color Display</u> <u>Industria, 50, Nave 9-Pol Ind. Conde de Sert</u> <u>08755 Barcelona Spain ,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,663.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.19	Nonpriority creditor's name and mailing address <u>Continental Lift Truck, Inc</u> <u>127-18 Foch Blvd</u> <u>South Ozone Park, NY 11420</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,409.93</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Servicing of Forklifts</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.20	Nonpriority creditor's name and mailing address <u>Cosmos Plastics</u> <u>3630 Wolf Rd</u> <u>Franklin Park, IL 60131</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$916.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 2: Additional Page

3.21	Nonpriority creditor's name and mailing address <u>Crowe Soberman, LLP</u> <u>2 St. Clair Avenue East 1100</u> <u>Toronto, Ontario, M4T 2T5,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$836.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Accounting [Canada]</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.22	Nonpriority creditor's name and mailing address <u>Daylight Transport, LLC</u> <u>204-248 North Ave E</u> <u>Elizabeth, NJ 07201</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$4,133.32</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Freight Service</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.23	Nonpriority creditor's name and mailing address <u>Denmark Technologies, Inc.</u> <u>547 Livingston Street</u> <u>Westbury, NY 11590</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$14,208.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Services-IT/Computers</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.24	Nonpriority creditor's name and mailing address <u>Derik Industrial Co., Ltd</u> <u>42 Memorial Plaza 2nd FL</u> <u>Pleasantville, NY 10570</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$23,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.25	Nonpriority creditor's name and mailing address <u>Distinctive Displays</u> <u>582 Montauk Ave</u> <u>Brooklyn, NY 11208</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.26	Nonpriority creditor's name and mailing address <u>Edgewood Partners INS Center</u> <u>499 Washington Blvd 810</u> <u>Jersey City, NJ 07310</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$5,895.07</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Insurance Broker</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.27	Nonpriority creditor's name and mailing address <u>Edison Litho</u> <u>3725 Tonelle Ave</u> <u>North Bergen, NJ 07047</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$35,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.28	Nonpriority creditor's name and mailing address <u>FCR Services</u> <u>PO Box 1663</u> <u>Southgate, MI 48195</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$873.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.29	Nonpriority creditor's name and mailing address <u>Fiabila</u> <u>106 Iron Mountain Rd</u> <u>Mine Hill, NJ 07803</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$11,130.53</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.30	Nonpriority creditor's name and mailing address <u>Freeport Screen & Stamping, Inc.</u> <u>31 Hanse Ave</u> <u>Freeport, NY 11520</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$99,327.45</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>trade debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.31	Nonpriority creditor's name and mailing address <u>Gilson Graphics</u> <u>2000 Oak Industrial Dr</u> <u>Grand Rapids, MI 49505</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$851.81</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.32	Nonpriority creditor's name and mailing address <u>Interstate Forklift Repairs</u> <u>130-08 143rd Street</u> <u>Jamaica, NY 11436</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$660.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Serive of Forklift</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.33	Nonpriority creditor's name and mailing address <u>In-Time Shipping</u> <u>145 Hook Creek Blvd C5C</u> <u>Valley Stream, NY 11581</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$21,321.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Customs Brokerage</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.34	Nonpriority creditor's name and mailing address <u>Jaci Fitzgerald</u> <u>5693 Lucas Lane</u> <u>Pea Ridge, AR 72751</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,600.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.35	Nonpriority creditor's name and mailing address <u>Jay Stone Sales</u> <u>24600 Southwell Rd</u> <u>Dallas, TX 75229</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$47,884.72</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sales</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.36	Nonpriority creditor's name and mailing address <u>Jupiter Mills Corp</u> <u>PO Box 1471</u> <u>Secaucus, NJ 07096</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$4,515.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.37	Nonpriority creditor's name and mailing address <u>K. Sidrane, Inc.</u> <u>24 Baiting Place Road</u> <u>Farmingdale, NY 11735</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$4,978.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.38	Nonpriority creditor's name and mailing address <u>Kaschap</u> <u>208, Pujit Plaza, Plot 67 Sector 11, CBD</u> <u>Belapur, Navi Mumbai 400614 Maharashta, India ,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$42,996.23</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.39	Nonpriority creditor's name and mailing address <u>Keystone Building Products</u> <u>2585 Old Rte 522</u> <u>Selinsgrove, PA 17870</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$496.59</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.40	Nonpriority creditor's name and mailing address <u>Keystone Industries</u> <u>480 S. Democrat Rd</u> <u>Gibbstown, NJ 08027</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$22,011.90</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.41 Nonpriority creditor's name and mailing address <u>Kirker Enterprises, Inc.</u> <u>2220 US Highway 70 SE Suite 100</u> <u>Hickory, NC 28602</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$49,093.48</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.42 Nonpriority creditor's name and mailing address <u>LEC Associates, LLC</u> <u>110 Chestnut Ridge Rd 318</u> <u>Montvale, NJ 07645</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,400.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <div style="text-align: right;">Safety Assessment</div> Basis for the claim: <u>Provider</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.43 Nonpriority creditor's name and mailing address <u>Leneta Company</u> <u>15 Whitney Road</u> <u>Mahwah, NJ 07430</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$362.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.44 Nonpriority creditor's name and mailing address <u>Lenny Lowe Enterprises, LLC</u> <u>758 Center Dr North Baldwin</u> <u>Baldwin, NY 11510</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,440.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.45	Nonpriority creditor's name and mailing address <u>Lorraine Guzzo</u> <u>860 E Broadway 2U</u> <u>NY 11561</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,115.05</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Sales Rep</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.46	Nonpriority creditor's name and mailing address <u>M & G Packaging Corp.</u> <u>99 Seaview Blvd 1-d</u> <u>Port Washington, NY 11050</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,559.30</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.47	Nonpriority creditor's name and mailing address <u>M & S Auto Masters & Sales, Inc.</u> <u>11 Niagara Ave</u> <u>Freeport, NY 11520</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,499.86</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Ford Truck Repairs</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.48	Nonpriority creditor's name and mailing address <u>MeadowBrook Inventions</u> <u>PO Box 960</u> <u>260 Mine Brook Rd</u> <u>Bernardsville, NJ 07924</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$43,353.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.49	Nonpriority creditor's name and mailing address <u>Metro Tag & Label</u> <u>24 Park Avenue</u> <u>West Orange, NJ 07052</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$8,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.50	Nonpriority creditor's name and mailing address <u>MP Holdings, Co.</u> <u>1881 Stanley Drive</u> <u>Merrick, NY 11566</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$296,436.97</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.51	Nonpriority creditor's name and mailing address <u>MS Packaging & Supply Distrib.</u> <u>53 Zorn Blvd</u> <u>Yaphank, NY 11980</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$24,429.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.52	Nonpriority creditor's name and mailing address <u>New Penn Motor Express</u> <u>11500 OUTLOOK S 400</u> <u>Leawood, KS 66211</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,240.31</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Freight</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.53	Nonpriority creditor's name and mailing address <u>NYSDEC</u> <u>625 Broadway 14th FL</u> <u>Albany, NY 12233</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$12,598.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Violations</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.54	Nonpriority creditor's name and mailing address <u>On Track</u> <u>50 E. Jefryn Blvd</u> <u>Deer Park, NY 11729</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$497.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Shipping/Freight</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.55	Nonpriority creditor's name and mailing address <u>Optimum Cable</u> <u>1 Court Square West</u> <u>Long Island City, NY 11101</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$705.28</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.56	Nonpriority creditor's name and mailing address <u>Osborn Law, PC</u> <u>43 West 43rd Street 131</u> <u>New York, NY 10036</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$67,824.75</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.57	Nonpriority creditor's name and mailing address <u>PACER Technology</u> <u>3281 E. Guasti Rd 260</u> <u>Ontario, CA 91761</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$65,474.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.58	Nonpriority creditor's name and mailing address <u>Pamela J. Bruce DBA Sales-Trac</u> <u>11150 Looking Glass</u> <u>Portland, MI 48875</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$375.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Consultant for Meters Account</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.59	Nonpriority creditor's name and mailing address <u>Patco Tapes, Inc.</u> <u>59-27 56th Street</u> <u>Maspeth, NY 11378</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$952.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.60	Nonpriority creditor's name and mailing address <u>PayPal</u> <u>PO Box 5138</u> <u>Lutherville Timonium, MD 21094</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$29,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>loan</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.61	Nonpriority creditor's name and mailing address <u>Pitney Bowes Global Financial</u> <u>PO Box 981022</u> <u>Boston, MA 02298</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,749.20</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.62	Nonpriority creditor's name and mailing address <u>PM Plastics</u> <u>627 Capital Drive</u> <u>Pewaukee, WI 53072</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$87,216.86</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.63	Nonpriority creditor's name and mailing address <u>Prime Packaging Corp</u> <u>1290 Metropolitan Ave</u> <u>Brooklyn, NY 11237</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,776.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.64	Nonpriority creditor's name and mailing address <u>Printex Transparent Packaging</u> <u>555 Raymond Dr</u> <u>Islandia, NY 11749</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$12,086.37</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.65	Nonpriority creditor's name and mailing address <u>QPC Label Solutions, Inc</u> <u>1583 40th Street</u> <u>Brooklyn, NY 11218</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,790.78</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.66	Nonpriority creditor's name and mailing address <u>Quinn & Feiner Service Company</u> <u>79 Hazel Street</u> <u>Glen Cove, NY 11542</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$7,192.38</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>HVAC</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.67	Nonpriority creditor's name and mailing address <u>Rad-Solutions, LLC</u> <u>2201 Justin Rd 119-142</u> <u>Flower Mound, TX 75028</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$135,065.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.68	Nonpriority creditor's name and mailing address <u>Rafael Espinal</u> <u>16 Round Hill Dr</u> <u>Danbury, CT 06811</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$7,796.61</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Monthly Expenses Car and Fuel</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

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3.69	Nonpriority creditor's name and mailing address <u>RTM Computer Services</u> <u>25 Thunder Rd</u> <u>Miller Place, NY 11764</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,220.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Computer/IT</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.70	Nonpriority creditor's name and mailing address <u>R-Way Shipping & Storage</u> <u>97-22 133rd Ave</u> <u>Ozone Park, NY 11417</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$4,950.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.71	Nonpriority creditor's name and mailing address <u>Sandream Impact, LLC</u> <u>373 Route 46 West Bldg E</u> <u>Fairfield, NJ 07004</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$37,960.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.72	Nonpriority creditor's name and mailing address <u>SAS Retail Services, LLC</u> <u>1575 N Main S</u> <u>Orange, CA 92867</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$3,548.70</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

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3.73	Nonpriority creditor's name and mailing address <u>Screen Tech</u> <u>1800 W. Blancke Street</u> <u>Linden, NJ 07036</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$7,739.19</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.74	Nonpriority creditor's name and mailing address <u>SGA snc di F.Ili Spizzi</u> <u>Sede operativa : via Trebbia 19 /2</u> <u>20073 Opera (MI),</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>unknown</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.75	Nonpriority creditor's name and mailing address <u>Silverman Group</u> <u>436 Orange Street</u> <u>New Haven, CT 06511</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,300.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Website Development</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.76	Nonpriority creditor's name and mailing address <u>Sparklet Co.</u> <u>1409 GANGBYEON HANSHIN CORE BLDG</u> <u>MAPO-DONG MAPO-KU SEOUL KOREA,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$21,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

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3.77	Nonpriority creditor's name and mailing address <u>Stephen Gould</u> <u>35 South Jefferson Road</u> <u>Whippany, NJ 07981</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$872,430.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.78	Nonpriority creditor's name and mailing address <u>Sungjae Corp in Korea</u> <u>726 Wolha-ro</u> <u>Haseong-myeon, Gimpo-si, Gyeonggi-do, South Korea,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.79	Nonpriority creditor's name and mailing address <u>Sunrise Credit Solutions</u> <u>PO Box 9004</u> <u>Melville, NY 11747</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$705.28</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Optimum</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.80	Nonpriority creditor's name and mailing address <u>Superior Materials, Inc.</u> <u>585 Stewart Ave LL32</u> <u>Garden City, NY 11530</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$505.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

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Part 2: Additional Page

3.81	Nonpriority creditor's name and mailing address <u>Team Technologies</u> <u>5949 Commerce Blvd</u> <u>Morristown, TN 37814</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$41,684.80</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.82	Nonpriority creditor's name and mailing address <u>transworld systems, inc</u> <u>500 Virginia Drive 514</u> <u>Fort Washington, PA 19034</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$3,081.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.83	Nonpriority creditor's name and mailing address <u>United Benefits Pensions, Inc</u> <u>175 Broadhollow Road 160</u> <u>Melville, NY 11747</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,500.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: _____ Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.84	Nonpriority creditor's name and mailing address <u>United Mineral & Chemical Corp</u> <u>160 Chubb Ave 206</u> <u>Lyndhurst, NJ 07071</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,805.36</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor FORSYTHE COSMETIC GROUP, LTD.

Name

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3.85	Nonpriority creditor's name and mailing address <u>Univar USA, Inc</u> <u>200 Dean Sievers Pl</u> <u>Morrisville, PA 19067</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$1,958.68</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.86	Nonpriority creditor's name and mailing address <u>UPS</u> <u>55 Glenlake Parkway, NE</u> <u>Atlanta, GA 30328</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$2,086.18</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>shipping</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.87	Nonpriority creditor's name and mailing address <u>Vedder Price, PC</u> <u>222 N. LaSalle Street 2400</u> <u>Chicago, IL 60601</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$60,345.10</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Legal Services</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.88	Nonpriority creditor's name and mailing address <u>Viavi Solutions</u> <u>3047 Orchard Parkway 10</u> <u>San Jose, CA 95134</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$30,000.00</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Trade Debt</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

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3.89	Nonpriority creditor's name and mailing address <u>Wells Fargo Vendor Financials</u> <u>PO Box 070241</u> <u>Philadelphia, PA 19176</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$900.50</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Lease Copy Machine</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.90	Nonpriority creditor's name and mailing address <u>William L. Rutherford Limited</u> <u>4180 Industrial Drive</u> <u>Windsor Ontario N9C 3R8,</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$3,095.24</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>broker</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.91	Nonpriority creditor's name and mailing address <u>Winter Bros Hauling of LI</u> <u>120 Nancy Street</u> <u>West Babylon, NY 11704</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$12,506.86</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed Basis for the claim: <u>Garbage Removal</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
3.92	Nonpriority creditor's name and mailing address <u>YRC Freight</u> <u>37 Frontage Rd</u> <u>Glenmont, NY 12077</u> Date or dates debt was incurred _____ Last 4 digits of account number ____ _	As of the petition filing date, the claim is: <u>\$6,141.40</u> <i>Check all that apply.</i> <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed Basis for the claim: <u>Freight</u> Is the claim subject to offset? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Case number (if known) _____

Name

Part 3: List Others to Be Notified About Unsecured Claims

4. List in alphabetical order any others who must be notified for claims listed in Parts 1 and 2. Examples of entities that may be listed are collection agencies, assignees of claims listed above, and attorneys for unsecured creditors.

If no others need to be notified for the debts listed in Parts 1 and 2, do not fill out or submit this page. If additional pages are needed, copy the next page.

	Name and mailing address	On which line in Part 1 or Part 2 is the related creditor (if any) listed?	Last 4 digits of account number, if any
4.1	Andrew M. Doktofsky, P.C. 52 Elm Street 6 Huntington, NY 11743	Line <u>3.4</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.2	Caine & Weiner PO Box 55848 Sherman Oaks, CA 91413	Line <u>3.61</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.3	Danielle Grzan, Esq. 366 North Broadway 410 Jericho, NY 11753	Line <u>3.46</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.4	Kirschenbaum & Kirschenbaum, P.C. 200 Garden City Plaza 315 Garden City, NY 11530	Line <u>3.13</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.5	Law Office of Gilbert A. Lazarus, PLLC 92-12 68th Ave Forest Hills, NY 11375	Line <u>3.24</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.6	Law Office of Michael Pepin 1350 Avenue of the Americas 2nd FL New York, NY 10019	Line <u>3.30</u> <input type="checkbox"/> Not listed. Explain _____	_____
4.7	Law Office of Tejal Shah, P.C. 2545 Hempstead Tkpe 403 East Meadow, NY 11554	Line <u>3.38</u> <input type="checkbox"/> Not listed. Explain _____	_____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**

Name

Case number (if known)

Part 3: Additional Page

4.8	Law Offices of Frank N. Napoli 357 Vetrans Memorial Highway Commack, NY 11725	Line 3.91 <input type="checkbox"/> Not listed. Explain _____	_____
4.9	Law Offices of Steven Cohen, LLC 540 East 180th 203 Bronx, NY 10457	Line 3.17 <input type="checkbox"/> Not listed. Explain _____	_____
4.10	Leviton Law Firm One Pierce Place 725 W Itasca, IL 60143	Line 3.63 <input type="checkbox"/> Not listed. Explain _____	_____
4.11	Ross & Suchoff, LLC 343 Millburn Ave 300 Millburn, NJ 07041	Line 3.49 <input type="checkbox"/> Not listed. Explain _____	_____
4.12	Taroff & Taltz, LLP 630 Johnson Ave 105 Bohemia, NY 11716	Line 3.88 <input type="checkbox"/> Not listed. Explain _____	_____
4.13	The Gold Law Firm, P.C. 1666 Newbridge Rd 2nd FL Bellmore, NY 11710	Line 3.35 <input type="checkbox"/> Not listed. Explain _____	_____
4.14	Webank 215 S. State St 1000 Salt Lake City, UT 84111	Line 3.60 <input type="checkbox"/> Not listed. Explain _____	_____

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
Name _____

Case number (if known) _____

Part 4: Total Amounts of the Priority and Nonpriority Unsecured Claims

5. Add the amounts of priority and nonpriority unsecured claims.

		Total of claim amounts	
5a. Total claims from Part 1	5a.		<u>\$0.00</u>
5b. Total claims from Part 2	5b.	+	<u>\$2,599,215.56</u>
5c. Total of Parts 1 and 2 Lines 5a + 5b = 5c.	5c.		<u>\$2,599,215.56</u>

Fill in this information to identify the case:

Debtor name FORSYTHE COSMETIC GROUP, LTD.

United States Bankruptcy Court for the:

Eastern District of New YorkCase number (if known): _____ Chapter 11☐ Check if this is an amended filing**Official Form 206G****Schedule G: Executory Contracts and Unexpired Leases****12/15****Be as complete and accurate as possible. If more space is needed, copy and attach the additional page, numbering the entries consecutively.**

1. Does the debtor have any executory contracts or unexpired leases?

☐ No. Check this box and file this form with the court with the debtor's other schedules. There is nothing else to report on this form.☒ Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Assets - Real and Personal Property* (Official Form 206A/B).**2. List all contracts and unexpired leases****State the name and mailing address for all other parties with whom the debtor has an executory contract or unexpired lease**

2.1	State what the contract or lease is for and the nature of the debtor's interest	<u>Commercial Lease of 10 Niagara Avenue</u>	<u>10 Niagara Avenue, LLC</u>
	State the term remaining		<u>5 Redbrook Rd</u>
	List the contract number of any government contract		<u>Freeport, NY 11520</u>
2.2	State what the contract or lease is for and the nature of the debtor's interest	<u>Copy Machine/Scanner</u>	<u>Wells Fargo Vendor Financials</u>
	State the term remaining		<u>PO Box 070241</u>
	List the contract number of any government contract		<u>Philadelphia, PA 19176</u>
2.3	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		
2.4	State what the contract or lease is for and the nature of the debtor's interest		
	State the term remaining		
	List the contract number of any government contract		

Fill in this information to identify the case:

Debtor name **FORSYTHE COSMETIC GROUP, LTD.**United States Bankruptcy Court for the: **Eastern** District of **New York**
(State)

Case number (If known): _____

☐ Check if this is an amended filing**Official Form 206H****Schedule H: Codebtors**

12/15

Be as complete and accurate as possible. If more space is needed, copy the Additional Page, numbering the entries consecutively. Attach the Additional Page to this page.**1. Does the debtor have any codebtors?**

- ☒ No. Check this box and submit this form to the court with the debtor's other schedules. Nothing else needs to be reported on this form.
- ☐ Yes

2. In Column 1, list as codebtors all of the people or entities who are also liable for any debts listed by the debtor in the schedules of creditors, Schedules D-G. Include all guarantors and co-obligors. In Column 2, identify the creditor to whom the debt is owed and each schedule on which the creditor is listed. If the codebtor is liable on a debt to more than one creditor, list each creditor separately in Column 2.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.1 _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.2 _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.3 _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.4 _____	Street _____ _____ City _____ State _____ ZIP Code _____	_____	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Debtor **FORSYTHE COSMETIC GROUP, LTD.**
 Name _____

Case number (if known) _____

Additional Page if Debtor Has More Codebtors

Copy this page only if more space is needed. Continue numbering the lines sequentially from the previous page.

Column 1: Codebtor		Column 2: Creditor	
Name	Mailing address	Name	Check all schedules that apply:
2.5	<div>_____</div> <div>Street _____</div> <div>_____</div> <div>_____</div> <div>City State ZIP Code</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G
2.6	<div>_____</div> <div>Street _____</div> <div>_____</div> <div>_____</div> <div>City State ZIP Code</div>	<div>_____</div> <div>_____</div> <div>_____</div>	<input type="checkbox"/> D <input type="checkbox"/> E/F <input type="checkbox"/> G

Fill in this information to identify the case:

Debtor name FORSYTHE COSMETIC GROUP, LTD.

United States Bankruptcy Court for the:

Eastern District of New YorkCase number (if known): _____ Chapter 11☐ Check if this is an amended filing**Official Form 206Sum****Summary of Assets and Liabilities for Non-Individuals****12/15****Part 1:** Summary of Assets**1. Schedule A/B: Assets—Real and Personal Property** (Official Form 206A/B)**1a. Real Property:**Copy line 88 from *Schedule A/B*.....\$0.00**1b. Total personal property:**Copy line 91A from *Schedule A/B*.....\$207,059.00**1c. Total of all property:**Copy line 92 from *Schedule A/B*.....\$207,059.00**Part 2:** Summary of Liabilities**2. Schedule D: Creditors Who Have Claims Secured by Property** (Official Form 206D)Copy the total dollar amount listed in Column A, *Amount of claim*, from line 3 of *Schedule D*.....\$512,664.78**3. Schedule E/F: Creditors Who Have Unsecured Claims** (Official Form 206E/F)**3a. Total claim amounts of priority unsecured claims:**Copy the total claims from Part 1 from line 5a of *Schedule E/F*.....\$0.00**3b. Total amount of claims of non-priority amount of unsecured claims:**Copy the total of the amount of claims from Part 2 from line 5b of *Schedule E/F*.....**+** \$2,599,215.56**4. Total liabilities**.....

Lines 2 + 3a + 3b

\$3,111,880.34

10 Niagara Avenue, LLC
5 Redbrook Rd
Freeport, NY 11520

A & F FIRE PROTECTION CO.,
INC
90 Otis Street
West Babylon, NY 11704

ABBOTT BALL COMPANY
P.O. BOX 330100
West Hartford, CT 06133

ACTION HAZMAT TRUCKING
3010 Burns Avenue
Wantagh, NY 11793

Advantage Paper & Packaging
P.O. Box 787
Deer Park, NY 11729-0787

AMANDA BENZAQUIN MATSIL
960 Saint Johnland Road
Kings Park, NY 11754

American Express
PO Box 297871
Fort Lauderdale, FL 33329

American Glitters, Inc.
68 Linden Street
Massapequa Park, NY 11762

Andrew M. Doktofsky, P.C.
52 Elm Street 6
Huntington, NY 11743

Arcbest
3801 Old Greenwood Road
Fort Smith, AR 72903

Atlantic Scale Company, Inc.
136 Washington Ave
Adelphia, NJ 07710

Avrum Rosen
38 New Street
Huntington, NY 11743

Baralan USA, Inc.
120-19 89TH Ave
Richmond Hill, NY 11418

Briscoe Protective
99 Mark Tree Road 201
Centereach, NY 11720

BTB Sales & Marketing, Inc.
2970 Merrick Rd
Bellmore, NY 11710

Caine & Weiner
PO Box 55848
Sherman Oaks, CA 91413

Capital One Spark Business
PO Box 71083
Edneyville, NC 28272

Cintas Corporation
500 South Research PL
Central Islip, NY 11722

Color Carton Corp.
341 Canal Place
Bronx, NY 10451

Color Display
Industria, 50, Nave 9-Pol Ind. Conde de
Sert
08755 Barcelona Spain

Continental Lift Truck, Inc
127-18 Foch Blvd
South Ozone Park, NY 11420

Cosmos Plastics
3630 Wolf Rd
Franklin Park, IL 60131

Crowe Soberman, LLP
2 St. Clair Avenue East 1100
Toronto, Ontario, M4T 2T5

Danielle Grzan, Esq.
366 North Broadway 410
Jericho, NY 11753

Daylight Transport, LLC
204-248 North Ave E
Elizabeth, NJ 07201

Denmark Technologies, Inc.
547 Livingston Street
Westbury, NY 11590

Derik Industrial Co., Ltd
42 Memorial Plaza 2nd FL
Pleasantville, NY 10570

Distinctive Displays
582 Montauk Ave
Brooklyn, NY 11208

Edgewood Partners INS
Center
499 Washington Blvd 810
Jersey City, NJ 07310

Edison Litho
3725 Tonelle Ave
North Bergen, NJ 07047

FCR Services
PO Box 1663
Southgate, MI 48195

Fiabila
106 Iron Mountain Rd
Mine Hill, NJ 07803

Freeport Screen & Stamping,
Inc.
31 Hanse Ave
Freeport, NY 11520

Gilson Graphics
2000 Oak Industrial Dr
Grand Rapids, MI 49505

Interstate Forklift Repairs
130-08 143rd Street
Jamaica, NY 11436

In-Time Shipping
145 Hook Creek Blvd C5C
Valley Stream, NY 11581

Jaci Fitzgerald
5693 Lucas Lane
Pea Ridge, AR 72751

Jay Stone Sales
24600 Southwell Rd
Dallas, TX 75229

Jupiter Mills Corp
PO Box 1471
Secaucus, NJ 07096

K. Sidrane, Inc.
24 Baiting Place Road
Farmingdale, NY 11735

Kascap

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M & S Auto Masters & Sales,
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Metro Tag & Label
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MS Packaging & Supply
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West Babylon, NY 11704

YRC Freight
37 Frontage Rd
Glenmont, NY 12077

IN THE UNITED STATES BANKRUPTCY COURT
EASTERN DISTRICT OF NEW YORK
CENTRAL ISLIP DIVISION

IN RE: FORSYTHE COSMETIC GROUP, LTD.

CASE NO

CHAPTER 11

VERIFICATION OF CREDITOR MATRIX

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 03/13/2024

Signature



Whitney Matza, Secretary and Treasurer